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 ** CONTINUING DATA ***** *No. SK.* *****

 ** FOREIGN APPLICATIONS ***** *No. SK.* *****

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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY IL	SHEETS DRAWING 5	TOTAL CLAIMS 33	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>SK.</i>	Verified and Acknowledged Examiner's Signature _____ Initials _____			

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TITLE

Method and apparatus for network initiated event reminder alerting

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
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